L02000021266

LAW OFFICE OF LISA A. MUSIAL 3717 Del Prado Blvd., S., #1 — Cape Coral, FL 33904				
City/State/Zip Phon	e #			
			Office Use Only	
CORPORATION NAME(S) & DO	CUMENT NU	MBER(S), (if known):	
1. QCE(Corporation Name)	Loz-z	Document #)	60000744 -08/30/02	 85867 01035002
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NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	☐ Ar ☐ Re ☐ Ch	ange of Regi ssolution/Wit	R.A., Officer/Director stered Agent thdrawal	SECRETARY OF STATE SECRETARY OF STATE OF CORPORATIONS 12 SEP -9 PM 2: 08
OTHER FILINGS	REGIS	STRATION/	QUALIFICATION	
Annual Report Fictitious Name	Lin Re	reign mited Partner instatement ademark her	rship	
CR2E031(7/97)			Examiner's In	itials



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

September 3, 2002

LAW OFFICE OF LISA A. MUSIAL 3717 DEL PRADO BLVD. S., #1 CAPE CORAL, FL 33904

SUBJECT: QCE, L.L.C.

Ref. Number: L02000021266

We have received your document for QCE, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign as registered agent, even if the agent is the same individual who has signed as a member. The registered agent signature line, at the bottom of the form, must be signed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 802A00050828

Law Office of Lisa A. Musial

The Professional Place 3717 Del Prado Blvd. S., Suite #1 ., Cape Coral, FL 33904

Phone (941) 542-1259 Fax: (941) 542-3931

September 7, 2002

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attn: Lee Rivers, Document Specialist

SUBJECT:

QCE, L.L.C.

Articles of Organization Document #L02000021266

Dear Lee:

I am in receipt of your letter dated September 3, 2002, in which your office indicated the registered agent also needed to sign, even though he signed as a managing member. Mr. Allen has now signed in both places, and I am returning the "Statement of Change of Registered Office or Registered Agent or both for Limited Liability Company" to you for recording. I did not notice the return of the \$25.00 check; thus, I am assuming you have simply held on to the check until the form was returned properly executed.

Thank you for your assistance. Please advise if you require further information.

Very truly yours,

Lisa A. Musial

LAM:sp

Enclosures

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the limited liability company is: ___QCE, L.L.C. 2. The mailing address of the limited liability company is: 3013 Del Prado Ilvd., Unit #13, Cape Coral, FL 33904 L02000021266 August 19, 2002 3. Date of filing/registration in Florida Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Glenn A. Allen Name 2153 Lakeview Blvd. Address North Ft. Myers, FL 33903 City, State and Zip 6. The name and address of the new registered agent and/or office: Glenn A. Allen Name 3013 Del Prado Blvd., Unit #13 Florida street address (P.O. Box NOT acceptable) Cape Coral 33904 City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) Glenn A. Allen Managing Member (Printed or typed name of signee) I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office addressy I hereby confirm that the limited liability company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

FILING FEE: \$25.00